

FEB 13 2002

## PART B - FEE(S) TRANSMITTAL

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7590

01/10/2002

SHERIDAN ROSS, P.C.  
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KATHLEEN BUSELL

(Depositor's name)

Kathleen Bussell

(Signature)

1/30/02

(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/444,144	11/20/1999	MARK DOUGLAS HOWELL	CYTO001	8275

TITLE OF INVENTION: METHOD FOR ENHANCING IMMUNE RESPONSES IN MAMMALS

TOTAL CLAIMS	APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
44	nonprovisional	YES	\$20	\$0	\$20	04/10/2002

EXAMINER	ART UNIT	CLASS-SUBCLASS
HELMS, LARRY RONALD	1642	424-529000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Use of PTO form(s) and Customer Number are recommended, but not required.

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47) attached.

2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 SHERIDAN ROSS P.C.

2 \_\_\_\_\_

3 \_\_\_\_\_

## 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY AND STATE OR COUNTRY)

CYTOLOGIC, LLC

FORT COLLINS, COLORADO

COLORADO STATE UNIVERSITY

RESEARCH FOUNDATION

FORT COLLINS, COLORADO

Please check the appropriate assignee category or categories (will not be printed on the patent)

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## 4a. The following fee(s) are enclosed:

☒ Issue Fee☐ Publication Fee☐ Advance Order - # of Copies \_\_\_\_\_

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(Authorized Signature)

(Date)

Annela Dallas

Jan. 30, 2002

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